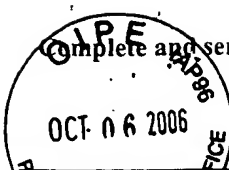


## PART B - FEE(S) TRANSMITTAL

10-10-06



Complete and send this form, together

applicable fee(s), to: Mail

Mail Stop ISS **FEE**  
 Commissioner for Patents  
 P.O. Box 1450  
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7590

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Gerald H. Kiel, Esq.

REED SMITH LLP

599 Lexington Avenue

New York, NY 10022-7650

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01 FC:1501 1400.00 OP  
 02 FC:8001 30.00 OP  
 03 FC:1504 300.00 OP

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Ruth Montalvo (Depositor's name)  
 (Signature)  
 October 6, 2006 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO. |
|-----------------|-------------|----------------------|-------------------------|------------------|
| 10/826,570      | 04/16/2004  | Joerg-Peter Schmidt  | GK-OEH-182/500814.20084 | 1765             |

TITLE OF INVENTION: RADIATION-TRANSPARENT DIE HALF FOR A FORMING DIE

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO           | \$1400        | \$300               | \$0                  | \$1700           | 10/10/2006 |

| EXAMINER                | ART UNIT | CLASS-SUBCLASS |
|-------------------------|----------|----------------|
| HECKENBERG JR, DONALD H | 1722     | 425-174400     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Reed Smith LLP

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

JENOPTIK Laser, Optik, Systeme GmbH

Jena, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Gerald H. Kiel

Date October 6, 2006

Typed or printed name

Gerald H. Kiel

Registration No. 25,116

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